

VILLA PINES LIVING CENTER  
201 S PARK ST PO BOX 130

FRIENDSHIP 53934 Phone:(608) 339-3361  
Operated from 1/1 To 12/31 Days of Operation: 366  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/04): 102  
Total Licensed Bed Capacity (12/31/04): 102  
Number of Residents on 12/31/04: 75

Ownership: Non-Profit Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 76

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		46.7	
Home Health Care	No	-----	-----	-----	-----	1 - 4 Years		38.7	
Supp. Home Care-Personal Care	No	Developmental Disabilities	0.0	Under 65	5.3	More Than 4 Years		14.7	
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	9.3	65 - 74	9.3			-----	
Day Services	No	Mental Illness (Other)	0.0	75 - 84	42.7			100.0	
Respite Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	38.7	*****			
Adult Day Care	No	Para-, Quadra-, Hemiplegic	5.3	95 & Over	4.0	Full-Time Equivalent			
Adult Day Health Care	No	Cancer	1.3		-----	Nursing Staff per 100 Residents			
Congregate Meals	No	Fractures	0.0		100.0	(12/31/04)			
Home Delivered Meals	No	Cardiovascular	14.7	65 & Over	94.7	-----			
Other Meals	No	Cerebrovascular	5.3		-----	RNs		11.6	
Transportation	No	Diabetes	10.7	Gender	%	LPNs		13.9	
Referral Service	No	Respiratory	17.3		-----	Nursing Assistants,			
Other Services	No	Other Medical Conditions	36.0	Male	29.3	Aides, & Orderlies			
Provide Day Programming for			-----	Female	70.7				
Mentally Ill	No		100.0		-----				
Provide Day Programming for					100.0				
Developmentally Disabled	No								

## Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	13	100.0	306	53	100.0	117	1	100.0	126	8	100.0	147	0	0.0	0	0	0.0	0	75	100.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	13	100.0		53	100.0		1	100.0		8	100.0		0	0.0		0	0.0		75	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	8.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	1.4	Bathing	1.3	80.0	18.7	75
Other Nursing Homes	2.8	Dressing	9.3	72.0	18.7	75
Acute Care Hospitals	81.5	Transferring	25.3	44.0	30.7	75
Psych. Hosp.-MR/DD Facilities	2.8	Toilet Use	21.3	49.3	29.3	75
Rehabilitation Hospitals	0.0	Eating	77.3	18.7	4.0	75
Other Locations	2.8	*****				
Total Number of Admissions	211	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	4.0		Receiving Respiratory Care	18.7
Private Home/No Home Health	15.8	Occ/Freq. Incontinent of Bladder	41.3		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	12.1	Occ/Freq. Incontinent of Bowel	28.0		Receiving Suctioning	0.0
Other Nursing Homes	4.2				Receiving Ostomy Care	4.0
Acute Care Hospitals	41.9	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	3.3	Physically Restrained	5.3		Receiving Mechanically Altered Diets	34.7
Rehabilitation Hospitals	0.0					
Other Locations	3.7	Skin Care			Other Resident Characteristics	
Deaths	19.1	With Pressure Sores	4.0		Have Advance Directives	69.3
Total Number of Discharges		With Rashes	10.7		Medications	
(Including Deaths)	215				Receiving Psychoactive Drugs	64.0

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	74.5	87.4	0.85	86.1	0.87	85.9	0.87	88.8	0.84
Current Residents from In-County	66.7	76.6	0.87	80.1	0.83	75.1	0.89	77.4	0.86
Admissions from In-County, Still Residing	10.0	21.5	0.46	19.9	0.50	20.5	0.49	19.4	0.51
Admissions/Average Daily Census	277.6	125.9	2.20	143.3	1.94	132.0	2.10	146.5	1.90
Discharges/Average Daily Census	282.9	124.5	2.27	144.8	1.95	131.4	2.15	148.0	1.91
Discharges To Private Residence/Average Daily Census	78.9	51.0	1.55	69.4	1.14	61.0	1.29	66.9	1.18
Residents Receiving Skilled Care	100	95.2	1.05	95.9	1.04	95.8	1.04	89.9	1.11
Residents Aged 65 and Older	94.7	96.2	0.98	93.5	1.01	93.2	1.02	87.9	1.08
Title 19 (Medicaid) Funded Residents	70.7	69.6	1.01	71.5	0.99	70.0	1.01	66.1	1.07
Private Pay Funded Residents	10.7	21.4	0.50	16.3	0.65	18.5	0.58	20.6	0.52
Developmentally Disabled Residents	0.0	0.4	0.00	0.7	0.00	0.6	0.00	6.0	0.00
Mentally Ill Residents	9.3	40.3	0.23	32.1	0.29	36.6	0.25	33.6	0.28
General Medical Service Residents	36.0	17.9	2.01	21.4	1.68	19.7	1.83	21.1	1.71
Impaired ADL (Mean)	46.9	47.6	0.99	48.7	0.96	47.6	0.99	49.4	0.95
Psychological Problems	64.0	57.1	1.12	55.2	1.16	57.1	1.12	57.7	1.11
Nursing Care Required (Mean)	9.0	7.3	1.24	7.9	1.14	7.3	1.23	7.4	1.21